

EXHIBIT 8

COPY

Riley

CLERK COMMON
PLEAS COURT
LICKING CO. OHIO
IN THE COMMON PLEAS COURT OF LICKING COUNTY, OHIO
DOMESTIC RELATIONS DIVISION

2012 OCT 25 PM 3:05

GEORGE MICHAEL RILEY, SR.
596 Moull Street #12
Newark, Ohio 43055
SSN: XXX-XX-3572
DOB: 08-14-63

RECEIVED
From Client
OCT 30 2012

GARY R. WALTERS
CLERK

Plaintiff,

vs.

Case No. 12DR1340

KATHERINE CORBIN RILEY
596 Moull Street #12
Newark, Ohio 43055
SSN: XXX-XX-3287
DOB: 05-12-59

Defendant.

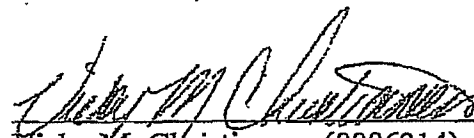
COMPLAINT FOR DIVORCE

1. Plaintiff has been a resident of the State of Ohio for more than six (6) months and a resident of Licking County for more than ninety (90) days immediately preceding the filing of this Complaint.
2. Plaintiff and Defendant were married June 6, 2007 in Clearwater, Florida.
3. Plaintiff and Defendant are incompatible as husband and wife.
4. Defendant is guilty of extreme cruelty and gross neglect of duty towards Plaintiff.
5. There were no children born as issue of this marriage and the Defendant is not pregnant.
6. Plaintiff and Defendant are the owners of miscellaneous personal property and owe various debts.

RILEY VS RILEY
COMPLAINT FOR DIVORCE
PAGE 2

7. Neither party is in bankruptcy.

WHEREFORE, Plaintiff demands that he be granted an absolute divorce from Defendant; that he be awarded his equitable share of the marital property; that he be awarded his separate property; and for such other and further relief as the court may deem proper.



Vicky M. Christiansen (0006214)

CHRISTIANSEN CO., L.P.A.

172 Hudson Avenue

Newark, Ohio 43055

Phone: (740) 349-7414

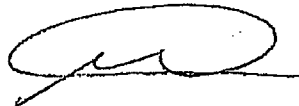
Fax: (740) 349-0869

Email: christiansen_company@windstream.net

Attorneys for Plaintiff

STATE OF OHIO;
COUNTY OF LICKING, §:

I, George Michael Riley, Sr., being duly sworn and cautioned according to law, hereby state that I am the Plaintiff in the above captioned action; that I have read the foregoing Complaint; and that the facts stated and allegations contained therein are true to the best of my knowledge and belief.



George Michael Riley, Sr., Plaintiff

Sworn to before me and subscribed in my presence this 24th day of October, 2012.

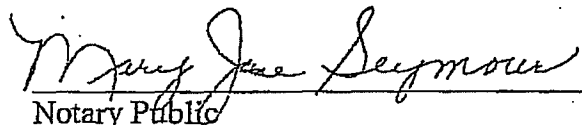

Notary Public

EXHIBIT 9

CLERK OF COURT
PLEAS COURT
LICKING CO. OHIO

2013 JAN -2 PM 1:18

GARY K. WALTERS
CLERK

COURT OF COMMON PLEAS
LICKING COUNTY, OHIO

RECEIVED

GEORGE M. RILEY SR.
Plaintiff/Petitioner

Case No. 12 DR 01240 JAN -7 2013

Judge CRB

v./and

Magistrate SNYDER RECEIVED

KATHARINE C. RILEY
Respondent/Petitioner

Instructions: Check local court rules to determine when this form must be filed.
List ALL OF YOUR PROPERTY AND DEBTS, the property and debts of your spouse, and any joint property or debts. Do not leave any category blank. For each item, if none, put "NONE." If you do not know exact figures for any item, give your best estimate, and put "EST." If more space is needed, add additional pages.

AFFIDAVIT OF PROPERTY

Affidavit of GEORGE M. RILEY SR.
(Print Your Name)

I. REAL ESTATE INTERESTS

I DO NOT OWN ANY REAL PROPERTY.

	<u>Address</u>	<u>Present Fair Market Value</u>	<u>Titled To</u>	<u>Mortgage Balance</u>	<u>Equity (as of date)</u>
1.	<u>/</u>	\$ <u> </u>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <u> </u>	\$ <u> </u>
2.	<u> </u>	\$ <u> </u>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <u> </u>	\$ <u> </u>

TOTAL SECTION I: REAL ESTATE INTERESTS \$ 0


II. OTHER ASSETS

Category	Description (List who has possession)	Titled To	Value/Date of Value
A. Vehicles and Other Certificate of Title Property	(Include model and year of automobiles, trucks, motorcycles, boats, motors, motor homes, etc.)		
1. 1994 CHEVY S10	H	<input checked="" type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ \$2,000.00 NO LIEN
2. 2011/2012 HONDA CIVIC	W	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	\$ \$17,000 NO LIEN
3.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
4.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
5.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
6.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
B. Financial Accounts	(Include checking, savings, CDs, POD accounts, money market accounts, etc.)		
HUSBAND HAS NO FINANCIAL ACCOUNTS.			
1. CHECKING ACCOUNT	W	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	\$ UNKNOWN
2. SAVINGS ACCOUNT	W	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	\$ UNKNOWN
3.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
4.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$

Category	Description (List who has possession) (Include profit-sharing, IRAs, 401k plans, etc.; Describe each type of plan)	Titled To	Value/Date of Value
C. Pensions & Retirement plans			
HUSBAND HAS NO PENSION/RETIREMENT ACCOUNTS.			
1. 401 (K)	W	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	\$ UNKNOWN
2.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
3.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
4.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
D. Publicly Held Stocks, Bonds, Securities & Mutual Funds			
1. Ø		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
2.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
3.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
4.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$
E. Closely Held Stocks & Other Business Interests and Name of Company			
1. MIKE RILEY SOLE PROPRIETORSHIP	H	<input checked="" type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ Ø
2.		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$

F. Life Insurance Type (Term/Whole Life)	(Any cash value or loans)	(Insured party & value upon death)
1. <u>H HAS NO LIFE INSURANCE</u>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
2. <u>W'S LIFE INSURANCE IS UNKNOWN.</u>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
3. _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
4. _____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

Category	Description	Who Has Possession	Value/Date of Value
G. Furniture & Appliances			
(Estimate value of those in your possession, and value of those in your spouse's possession)			
1. <u>H</u>	<u>FURNITURE WORTH \$5,000 GIVEN TO H BY H'S FATHER</u>	<input checked="" type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <u>5,000 OCT - GIFT TO H FROM H'S FATHER</u>
2. <u>W</u>	<u>\$10,000 - IN W'S POSSESSION IN FLORIDA</u>	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	\$ <u>10,000 PST</u>
3. _____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
4. _____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

H. Safe Deposit Box	(Give location and describe contents)	Titled To
1. <u></u>	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both
2. _____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both

I. Transfer of Assets

Explanation: List the name and address of any person (other than creditors listed on your Affidavit) who has received money or property from you exceeding \$300 in value in the past 12 months and the reason for each transfer.

1.	<u>Ø</u>	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____
2.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____
3.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____
4.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____

<u>Category</u>	<u>Description</u> (Also list who has possession)	<u>Titled To</u>	<u>Value/Date of Value</u>
J. All Other Assets Not Listed Above	Explanation: List any item you have not listed above that is considered an asset.		

1.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____
2.	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$	_____

TOTAL SECTION II: OTHER ASSETS \$ 34,000 EST

III. SEPARATE PROPERTY CLAIMS: Pre-marital assets, gifts to one spouse only, inheritances

If you are making any claims in any of the categories below, explain the nature and amount of your claim. This includes, but is not limited to, inheritances, property owned before marriage, and any pre-marital agreements.

<u>Category</u> (Pre-marital Gift, Inheritance, etc., acquired after separation)	<u>Description</u>	<u>Why do you claim this as a separate property?</u>	<u>Present Fair Market Value</u>
1.	<u>Gift to H from H's father - \$5,000 in furniture</u>		\$ <u>5,000 EST.</u>
2.	_____		\$ _____
3.	_____		\$ _____
4.	_____		\$ _____
5.	_____		\$ _____

TOTAL SECTION III: SEPARATE PROPERTY CLAIMS \$ 5,000 EST.

IV. DEBT

List ALL OF YOUR DEBTS, the debts of your spouse, and any joint debts. Do not leave any category blank. For each item, if none, put "NONE." If you don't know exact figures for any item, give your best estimate, and put "EST." If more space is needed to explain, please attach an additional page with the explanation and identify which question you are answering.

Type	Name of Creditor/Purpose of Debt	Account Name	Name(s) on Account	Total Debt Due	Monthly Payment
A. Secured Debt (Mortgages, Car, etc.)					
1. <u>0</u>			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
2. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
B. Unsecured Debt, including credit cards					
1. <u>\$96,000 Debt to Gutknecht Construction</u>			<input checked="" type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ <u>96,000</u>	\$ <u>NONE - IN FOREBEARANCE</u>
2. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5. _____			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
TOTAL SECTION IV: DEBT				\$ <u>96,000</u>	

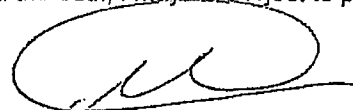
V. BANKRUPTCY

	Filed by: Wife, Husband, Both	Date of Filing: Case Number	Date of Discharge or Relief from Stay	Type of Case (Ch. 7, 11, 12, 13)	Current Monthly Payments
1.	<input type="checkbox"/> Husband <input checked="" type="checkbox"/> Wife <input type="checkbox"/> Both	<u>UNKNOWN</u>	<u>CURRENTLY PENDING</u>	<u>UNKNOWN</u>	\$ <u> </u>
2.	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	<u> </u>	<u> </u>	<u> </u>	\$ <u> </u>
TOTAL SECTION V: BANKRUPTCY					\$ <u>UNKNOWN</u>

OATH

(Do Not Sign Until Notary is Present)

I, (print name) GEORGE M. RILEY SR. swear or affirm that I have read this document and, to the best of my knowledge and belief, the facts and information stated in this document are true, accurate and complete. I understand that if I do not tell the truth, I may be subject to penalties for perjury.

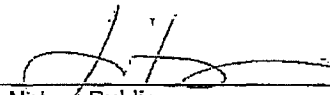


Your Signature

Sworn before me and signed in my presence this 20 day of DECEMBER, 2012.



Julia K. Fix, Attorney At Law
NOTARY PUBLIC - STATE OF OHIO
My commission has no expiration date
Sec. 147.03 R.C.

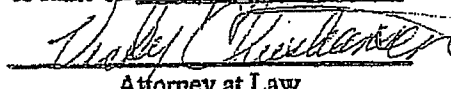


Notary Public

My Commission Expires:

N/A

I certify that the foregoing document was served in accordance with Rule 5 of the Ohio Rules of Civil Procedure by mailing a copy of same on 1/3/13.



Attorney at Law